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PTO/SB/21 (05-03)

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/302,407	
	Filing Date	April 30, 1999	
	First Named Inventor	FABIAN, Frank W.	
	Group Art Unit	2643	
	Examiner Name	HARVEY, Dionne	
Total Number of Pages in This Submission		Attorney Docket Number	57472/3

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Terminal Disclaimer	1) Request for Continued Examination
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Request for Refund	2) Change of Attorney or Agent's Address in Application (37 CFR 1.8(a))
	<input type="checkbox"/> CD, Number of CD(s) _____	
Remarks		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		Technology Center 2600
Firm or Individual name	Kenneth Bousfield McCarthy Tetrault LLP	
Signature		
Date	March 24, 2004	

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the		
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Signature		Date

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# FEE TRANSMITTAL for FY 2004

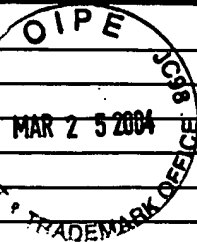
Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$595.00

## Complete if Known

Application Number 09/302,407  
Filing Date April 30, 1999  
First Named Inventor FABIAN, Frank W.  
Examiner Name HARVEY, Dionee  
Art Unit 2643  
Attorney Docket No. 57472/3



## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number 150633  
Deposit Account Name McCarthy Tetrault LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	2001	770	385	Utility filing fee	
1002	2002	340	170	Design filing fee	
1003	2003	530	265	Plant filing fee	
1004	2004	770	385	Reissue filing fee	
1005	2005	160	80	Provisional filing fee	
SUBTOTAL (1)					(\$)

### 2. EXTRA CLAIM FEES FOR UTILITY AND

Total Claims	Extra Claims	Fee from below	Fee Paid
0	-20** = 0	X	0.00
0	-3** = 0	X	0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1202	2202	18	9	Claims in excess of 20	
1201	2201	86	43	Independent claims in excess of 3	
1203	2203	290	145	Multiple dependent claim, if not paid	
1204	2204	86	43	** Reissue independent claims over original patent	
1205	2205	18	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$) \$0.00

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	2051	130	65	Surcharge - late filing fee or oath	
1052	2052	50	25	Surcharge - late provisional filing fee or cover sheet	
1053	1053	130	130	Non - English specification	
1812	1812	2,520	2,520	For filing a request for ex parte reexamination	
1804	1804	920*	920*	Requesting publication of SIR prior to Examiner action	
1805	1805	1,840*	1,840*	Requesting publication of SIR after Examiner action	
1251	2251	110	55	Extension for reply within first month	
1252	2252	420	210	Extension for reply within second month	210.00
1253	2253	950	475	Extension for reply within third month	
1254	2254	1,480	740	Extension for reply within fourth month	
1255	2255	2,010	1,005	Extension for reply within fifth month	
1401	2401	330	165	Notice of Appeal	
1402	2402	330	165	Filing a brief in support of an appeal	
1403	2403	290	145	Request for oral hearing	
1451	2451	1,510	1,510	Petition to institute a public use proceeding	
1452	2452	110	55	Petition to revive - unavoidable	
1453	2453	1,330	665	Petition to revive - unintentional	
1501	2501	1,330	665	Utility issue fee (or reissue)	
1502	2502	480	240	Design issue fee	
1503	2503	640	320	Plant issue fee	
1460	1460	130	130	Petitions to the Commissioner	
1807	1807	50	50	Processing fee under 37 CFR § 1.17(q)	
1806	1806	180	180	Submission of Information Disclosure Statement	
8021	8021	40	40	Recording each patent assignment per property (times number of properties)	
1809	2809	770	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	2810	770	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	2801	770	385	Request for Continued Examination (RCE)	385.00
1802	900	900	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) \$595.00

## SUBMITTED BY

Name (Print/Type)	Kenneth J. Bousfield	Registration No. (Attorney/Agent)	40,460	Telephone	(416)601-7847
Signature		Date	March 24, 2004		

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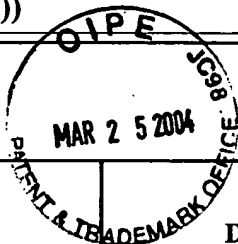
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**Change Of Attorney Or Agent's Address In Application**  
**(37 CFR 1.8(a))**

Docket No.  
Was 57472/3 Now T1251/2 US

In Re Application Of: Frank W. Fabian



#12  
4/7/04

Serial No.  
09/302,407

Filing Date  
April 30, 1999

Examiner  
Dionne Harvey

Group Art Unit  
2643

Invention: **LOUDSPEAKER**

**TO THE COMMISSIONER FOR PATENTS**

Please send all correspondence for this application to:

**McCarthy Tetrault LLP**  
Suite 4700, P.O. Box 48  
Toronto Dominion Bank Tower  
Toronto, Ontario  
M5K 1E6, Canada

Attention: **Kenneth Bousfield**

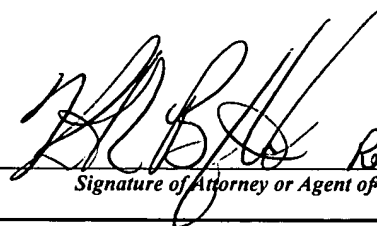
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**Technology Center 2600**

Please direct all telephone calls to:

**Kenneth Bousfield**  
**(416) 601-7847**

  
Reg. No. 40,460  
*Signature of Attorney or Agent of Record*

Dated: **March 24, 2004**

**40,460**  
**McCarthy Tetrault LLP**  
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M5K 1E6, Canada

*Registration Number & Address of Attorney or Agent of Record*

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